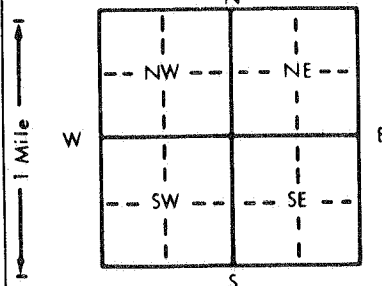


1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 3 Township Number T 21 S Range Number R 11 EW
 County: LYON
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: City of OIpe
 RR#, St. Address, Box #: Box 104
 City, State, ZIP Code: OIpe KS 66865
 Board of Agriculture, Division of Water Resources
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 4 DEPTH OF COMPLETED WELL: 20 ft. ELEVATION: 18 ft.
 Depth(s) Groundwater Encountered 1. 10 ft. 2. 18 ft. 3. 20 ft.
 WELL'S STATIC WATER LEVEL 10 ft. below land surface measured on mo/day/yr 3-30-92
 Pump test data: Well water was n/a ft. after n/a hours pumping n/a gpm
 Est. Yield n/a gpm: Well water was n/a ft. after n/a hours pumping n/a gpm
 Bore Hole Diameter: n/a in. to n/a ft., and n/a in. to n/a ft.
 WELL WATER TO BE USED AS:
 1 Domestic 1 Feedlot 6 Oil field water supply 9 Dewatering
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes n/a No X If yes, mo/day/yr sample was submitted n/a
 Water Well Disinfected? Yes V No

5 TYPE OF BLANK CASING USED: n/a 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued n/a Clamped n/a
 1 Steel 3 RMP (SR) well is being plugged 6 Asbestos-Cement 9 Other (specify below) Welded n/a
 2 PVC 4 ABS 7 Fiberglass Threaded n/a
 Blank casing diameter n/a in. to n/a ft., Dia n/a in. to n/a ft., Dia n/a in. to n/a ft., Dia n/a in. to n/a ft.
 Casing height above land surface n/a in., weight n/a lbs./ft. Wall thickness or gauge No. n/a
 TYPE OF SCREEN OR PERFORATION MATERIAL: n/a
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) N/A
 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: n/a
 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) N/A
 SCREEN-PERFORATED INTERVALS: From n/a ft. to n/a ft., From n/a ft. to n/a ft., From n/a ft. to n/a ft., From n/a ft. to n/a ft.
 GRAVEL PACK INTERVALS: From 10 ft. to 22 ft., From 10 ft. to 22 ft., From 10 ft. to 22 ft., From 10 ft. to 22 ft.
 (to plug) (below surface)

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Intervals: From 4.5 ft. to 5.0 ft., From 4.5 ft. to 5.0 ft., From 4.5 ft. to 5.0 ft., From 4.5 ft. to 5.0 ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage
 How many feet?

Direction from well?		LITHOLOGIC LOG	FROM TO		PLUGGING INTERVALS
FROM	TO		FROM	TO	
			22'	10'	1" washed rock (chlorinated)
			10'	5'	clay
			5'	4.5'	Bentonite
			4.5'	surface	topsoil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and completed on (mo/day/year) 3-30-92 and this record is true to the best of my knowledge and belief. Kan Water Well Contractor's License No. n/a This Water Well Record was completed on (mo/day/yr) 3-30-92 under the business name of City of OIpe, KS by (signature) James B. Schmidt, CE

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.